

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

17-2641

C. Tate George

#63223-050

FCI Fort Dix

Box 2000

Joint Base MDX, MD 08640-5433

2.

7012 0470 0000 0541 5037

A. Signature

X

MAILROOM

P.O. BOX 38

B. Received by (Printed Name)

PORT DIX, MD 08640

☐ Agent

☐ Addressee

C. Date of Delivery

07/15/17

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☐ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

UNITED STATES POSTAL SERVICE

NO CBS

17 JUL '17

PM-4 L



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4 in this box •

CLERK, U.S. DISTRICT COURT
CLARKSON S. FISHER U.S. COURTHOUSE
AND FEDERAL BUILDING
402 E. STATE STREET, RM. 2020
TRENTON, NEW JERSEY 08608

Attn: Karen McGonigle

